Fill in this information to identify your case:	eck one box only as di	irected in this form and i	n Form								
	2A-1Supp:										
Debtor 2 (Spouse, if filing) Alison M. Donovan	■ 1. There is no presu	umption of abuse									
	☐ 2. The calculation to determine if a presumption of abuse applies will be made underChapter 7 Means Test Calculation (Official Form 122A-2).										
Case number (if known)	☐ 3. The Means Test does not apply now because of qualified military service but it could apply later.										
	☐ Check if this is a	n amended filing									
Official Form 122A - 1											
Chapter 7 Statement of Your Current Monthly Inc	ome		12/15								
Be as complete and accurate as possible. If two married people are filing together, both are equally a separate sheet to this form. Include the line number to which the additional information applies number (if known). If you believe that you are exempted from a presumption of abuse because you military service, complete and file Statement of Exemption from Presumption of Abuse Under § 70 Part 1: Calculate Your Current Monthly Income	On the top of any addition to the top of any addition of the top of any addition of the top of the	ional pages, write your na consumer debts or becau	me and case se of qualifying								
What is your marital and filing status? Check one only.											
□ Not married. Fill out Column A, lines 2-11.											
■ Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.											
☐ Married and your spouse is NOT filing with you. You and your spouse are:											
☐ Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.											
□ Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C § 707(b)(7)(B).											
Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.											
	Column A Debtor 1	Column B Debtor 2 or non-filing spouse									
Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$3,009.60	\$\$									
Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$	\$0.00									
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in Do not include payments you listed on line 3.	n. \$ 0.00	\$ 0.00									

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

Debtor 1

Debtor 1

0.00 Copy here -> \$

0.00 Copy here -> \$

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

0.00

-\$

\$

-\$

page 1

5. Net income from operating a business, profession, or farm

Net monthly income from a business, profession, or farm \$

Gross receipts (before all deductions)

Gross receipts (before all deductions)

7. Interest, dividends, and royalties

Ordinary and necessary operating expenses

6. Net income from rental and other real property

Ordinary and necessary operating expenses

Net monthly income from rental or other real property

					Column A Debtor 1		Column B Debtor 2 o non-filing	-		
8.	Unem	ployment compensation			\$	0.00	\$	0.00		
	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:									
		you\$		0.00						
	For	your spouse \$		0.00						
9.	Pensio	on or retirement income. Do not include any amouthe Social Security Act.	unt received that wa	s a benefit	\$	0.00	\$	0.00		
10.	not inc a victin	e from all other sources not listed above. Specified any benefits received under the Social Security of a war crime, a crime against humanity, or interressary, list other sources on a separate page and put	y Act or payments re national or domestic	eceived as						
		·			\$	0.00	\$	0.00		
					\$	0.00	\$	0.00		
		Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00		
11.		late your total current monthly income. Add line column. Then add the total for Column A to the total		\$3	3,009.60	+ _	2,616.00	5,62 Total current r		
Part	2:	Determine Whether the Means Test Applies to	You					income		
12.	Calcul	late your current monthly income for the year.	Follow these steps:							
	12a. C	Copy your total current monthly income from line 1	1		Сор	y line 11 l	nere=>	\$5,62	5.60	
	Multiply by 12 (the number of months in a year)						x 12			
	12b. The result is your annual income for this part of the form						121	67,50°	7.20	
13.	Calcul	late the median family income that applies to yo	ou. Follow these ste	ps:						
	Fill in t	he state in which you live.	PA							
	Fill in t	the number of people in your household.	3							
Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clets office.										
14.	How d	lo the lines compare?								
	14a.	Line 12b is less than or equal to line 13. Or Go to Part 3.	the top of page 1,	check box	1T,here is no	presumpti	on of abuse.			
	14b.	Line 12b is more than line 13. On the top of Go to Part 3 and fill out Form 122A-2.	page 1, check box	2The presu	ımption of al	buse is det	ermined by F	orm 122A-2.		
Part	3:	Sign Below								
	В	y signing here, I declare under penalty of perjury the	at the information or	this statem	nent and in a	any attachn	nents is true a	and correct.		
	X /s/ James K. Donovan X /s/ Alison M. Donovan									
		James K. Donovan		Alison I	M. Donova	an				
	.	Signature of Debtor 1	_	ŭ	of Debtor 2					
	Date	September 11, 2017 MM / DD / YYYY	Date	Septem MM / DD	ber 11, 20 / YYYY)17				
	If	you checked line 14a, do NOT fill out or file Form	122A-2.							
	lf	you checked line 14b, fill out Form 122A-2 and fil	e it with this form.							

Official Form 122A-1